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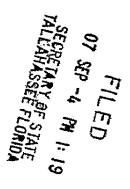
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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of Florida Profit Corpo	oration
DOCUMENT NUMBER: PO30001	58373
The enclosed Articles of Dissolution and fee are submitte	d for filing.
Please return all correspondence concerning this matter to	the following:
Emily Gonzalez	
(Name of Contact Person)
Law Offices of Emily A. Feigenbaum, P.A.	
(Firm/Company)	선
746 NE 3rd Ave.	
(Address)	
Fort Lauderdale, FL 33304	
(City/State and Zip Code	e)
For further information concerning this matter, please call:	:
Emily Gonzalez at (305	5 926-9038
(Name of Contact Person) (Are	ea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
✓\$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filin	* *
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Departm	ent of State	e:	
	Law Offices of Emily A. Feigenbaum, P.A.	 .		
SECOND:	The document number of the corporation (if known):			
THIRD:	The file date of the articles of incorporation: July 10, 2007			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	None of the corporation's shares have been issued.			
	The corporation has not commenced business.			
FIFTH:	No debt of the corporation remains unpaid.			
	The net assets of the corporation remaining after winding up have been d to the shareholders, if shares were issued.	istributed		
SEVENTH:	Adoption of Dissolution (CHECK ONE)	TALL	07	
	A majority of the incorporators authorized the dissolution.	器	SE SE	7
	A majority of the directors authorized the dissolution.	NY OF	ا م	
Signa	ature: (By a director, president or other officer - if directors or officers have not been selected, by	LONIDA		U
	in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)			
	Emily Gonzalez (Typed or printed name of person signing)			
	Owner, President			
	(Title of Person Signing)			

Filing Fee: \$35